

U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE	
DECLARATION	ATTORNEY'S DOCKET NO. 13533/48103

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter that is claimed and for which a Letters Patent is sought on the invention entitled **CREATION OF A BIOLOGICAL ATRIOVENTRICULAR BYPASS TO COMPENSATE FOR ATRIOVENTRICULAR BLOCK** the specification of which was filed in the United States Patent and Trademark Office on **June 23, 2006** and has been accorded U.S. Serial No. **10/584,303** and which was also filed as PCT International Patent Application No. **PCT/US2004/042953** on **December 22, 2004**.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, C.F.R. § 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

PRIOR FOREIGN APPLICATION(S)

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below any foreign application for patent or inventor's certificate or PCT International application having a filing date before that of the application on which priority is claimed:

COUNTRY	APPLICATION NUMBER	DATE OF FILING (day, month, year)	DATE OF ISSUE (day, month, year)	PRIORITY CLAIMED UNDER 35 U.S.C. § 119

PRIOR UNITED STATES APPLICATION(S)

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below:

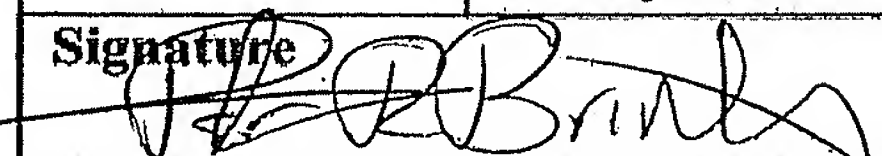
APPLICATION NUMBER	FILING DATE (day, month, year)
60/532,363	24 December 2003

SEND CORRESPONDENCE, AND DIRECT TELEPHONE CALLS TO:

Deborah A. Somerville, Esq.
 KENYON & KENYON LLP
 One Broadway
 New York, N.Y. 10004
 Telephone: (212) 425-7200
 Facsimile: (212) 425-5288

Customer No. 26646

I declare that all statements made herein of my own knowledge are true and all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under § 1001 of Title 18 of the United States Code and that such willful statements may jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF INVENTOR	FAMILY NAME BRINK	FIRST GIVEN NAME Peter	SECOND GIVEN NAME R.
RESIDENCE & CITIZENSHIP	CITY Setauket	STATE OR FOREIGN COUNTRY New York	COUNTRY OF CITIZENSHIP U.S.A.
POST OFFICE ADDRESS	POST OFFICE ADDRESS 101 Dyke Road	CITY Setauket	STATE & ZIP CODE/COUNTRY New York, 11733
Signature 		Date 2/14/07	


I declare that all statements made herein of my own knowledge are true and all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under § 1001 of Title 18 of the United States Code and that such willful statements may jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF INVENTOR	FAMILY NAME COHEN	FIRST GIVEN NAME Ira	SECOND GIVEN NAME S.
RESIDENCE & CITIZENSHIP	CITY Stony Brook	STATE OR FOREIGN COUNTRY New York	COUNTRY OF CITIZENSHIP U.S.A.
POST OFFICE ADDRESS	POST OFFICE ADDRESS 23 Hawks Nest Road	CITY Stony Brook	STATE & ZIP CODE/COUNTRY New York, 11790
Signature <i>Ira S. Cohen</i>		Date <i>2/14/07</i>	

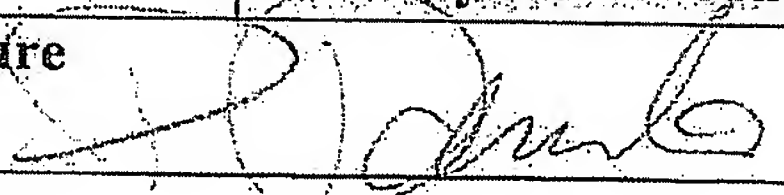
I declare that all statements made herein of my own knowledge are true and all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under § 1001 of Title 18 of the United States Code and that such willful statements may jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF INVENTOR	FAMILY NAME ROSEN	FIRST GIVEN NAME Michael	SECOND GIVEN NAME R
RESIDENCE & CITIZENSHIP	CITY New York	STATE OR FOREIGN COUNTRY New York	COUNTRY OF CITIZENSHIP USA
POST OFFICE ADDRESS	POST OFFICE ADDRESS 25 East 86th Street, Apt. 14C	CITY New York	STATE & ZIP CODE/COUNTRY New York, 10028
Signature 		Date 9/1/07	

I declare that all statements made herein of my own knowledge are true and all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under § 1001 of Title 18 of the United States Code and that such willful statements may jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF INVENTOR	FAMILY NAME ROBINSON	FIRST GIVEN NAME Richard	SECOND GIVEN NAME B
RESIDENCE & CITIZENSHIP	CITY Cresskill	STATE OR FOREIGN COUNTRY New Jersey	COUNTRY OF CITIZENSHIP USA
POST OFFICE ADDRESS	POST OFFICE ADDRESS 67 Roosevelt Street	CITY Cresskill	STATE & ZIP CODE/COUNTRY New Jersey, 07626
Signature 		Date 3/8/07	

I declare that all statements made herein of my own knowledge are true and all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under § 1001 of Title 18 of the United States Code and that such willful statements may jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF INVENTOR	FAMILY NAME DANILO, Jr.	FIRST GIVEN NAME Peter	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY Hopewell	STATE OR FOREIGN COUNTRY New Jersey	COUNTRY OF CITIZENSHIP U.S.A.
POST OFFICE ADDRESS	POST OFFICE ADDRESS 81 Stonybrook Road	CITY Hopewell	STATE & ZIP CODE/COUNTRY New Jersey, 08525
Signature 		Date 9 March 2007	